

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000122478

FILED  
Apr 08, 2011  
Secretary of State

Entity Name: VIVABOXES US, INC.

**Current Principal Place of Business:**

9801 WASHINGTONIAN BLVD  
GAITHERSBURG, MD 20878 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 352  
BUFFALO, NY 14240 US

**New Mailing Address:**

FEI Number: 20-3462163      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HENRY, PIERRE  
Address: 9801 WASHINGTONIAN BLVD  
City-St-Zip: GAITHERSBURG, MD 20878

Title: CEO  
Name: DEAN, JON  
Address: 9801 WASHINGTONIAN BLVD  
City-St-Zip: GAITHERSBURG, MD 20878

Title: S  
Name: ROBINS, SCOTT  
Address: 9801 WASHINGTONIAN BLVD  
City-St-Zip: GAITHERSBURG, MD 20878

Title: T  
Name: HANCOCK, PHILIP  
Address: 9801 WASHINGTONIAN BLVD  
City-St-Zip: GAITHERSBURG, MD 20878

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT ROBINS

S

04/08/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date